

Non-Profit Abuse Complaint Form

Tom Miller
Attn: Non-Profit Complaints
Attorney General of Iowa
Hoover State Office Building
1300 E. Walnut, Des Moines, Iowa 50319
515-281-5926
E-mail: consumer@ag.state.ia.us

Instructions: To help us handle your complaint:

1. Please print or type. Answer all questions fully and correctly.
2. Include photocopies of any documents that may relate to your complaint Claim.
3. Return the information to the address above.

PLEASE NOTE IMPORTANT OPEN RECORDS INFORMATION
ON THE SECOND PAGE OF THIS FORM.

YOUR NAME AND ADDRESS:

Name

Address

City _____ State _____ Zip _____

Home Phone Number _____

Work Phone Number _____

Your Age _____

NAME OF NON-PROFIT OR PERSON THE COMPLAINT IS AGAINST:

Name

Address

City _____ State _____ Zip _____

Phone Number _____ Fax Number _____

Have you contacted an attorney? _____ No _____ Yes

When: _____

Name of attorney
contacted: _____

What do you think needs to be done? _____

Summary of Your Complaint. Please download this complaint form and return by
mail to the above address. Please print or type. Use additional paper if
necessary.

I understand that the Attorney Generals Office is not my private attorney
but represents the public in enforcing laws designed to protect consumers
from misleading or unlawful business practices. I also understand I may
contact a private attorney for legal advice.

Please sign here.

Signature _____ Date _____

Note: Complaints are Open Records Under Iowa law, complaint forms or letters
are "open records." The public has the right to review or obtain copies of
open records. Also, copies of complaints are routinely sent to the person or
business the complaint is directed against.

Please call or write the Consumer Attorney General's Office, if you have
questions
about the open records law.